

**FEE  
TRANSMITTAL**

**Patent fees are subject to annual revision.**

**TOTAL AMOUNT OF PAYMENT**

**(S) 928.00**

Attorney Docket No. CE09386R

**METHOD OF PAYMENT**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

**Deposit Account Number**

**50-2117**

v Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check     Credit Card     Money Order     Other

## FEE CALCULATION

### **1. BASIC FILING FEE**

| Large<br>Fee<br>Code | Entity<br>Fee<br>(\$) | Small<br>Fee<br>Code | Entity<br>Fee<br>(\$) | Fee Paid           |
|----------------------|-----------------------|----------------------|-----------------------|--------------------|
| 1001                 | 750                   | 2001                 | 375                   | Utility filing fee |
| 1002                 | 330                   | 2002                 | 165                   | Design filing fee  |
| 1003                 | 520                   | 2003                 | 260                   | Plant filing fee   |
| 1004                 | 750                   | 2004                 | 375                   | Reissue filing fee |

**SUBTOTAL (1) (S) 750.00**

## **2. EXTRA CLAIM FEES**

|                    | Previously<br>Paid** | Extra<br>Claims | Fee from<br>below | Fee Paid |
|--------------------|----------------------|-----------------|-------------------|----------|
| Total Claims       | 23                   | 3               | 18                | 54       |
| Independent Claims | 4                    | 1               | 84                | 84       |
| Multiple Dependent |                      |                 | 280               | =        |

#### **Multiple Dependent**

| Large<br>Fee<br>Code<br>1202 | Entity<br>Fee<br>Code<br>18 | Small<br>Fee<br>Code<br>2202 | Entity<br>Fee<br>Code<br>9 | Fee Description<br>Claims in excess of 20                 |
|------------------------------|-----------------------------|------------------------------|----------------------------|---|
| 1201                         | 84                          | 2201                         | 42                         | Independent claims in excess of 3                         |
| 1203                         | 280                         | 2203                         | 140                        | Multiple dependent claim, if not paid                     |
| 1204                         | 84                          | 2204                         | 42                         | * Reissue independent claims over original patent         |
| 1205                         | 18                          | 2205                         | 9                          | * Reissue claims in excess of 20 and over original patent |

**SUBTOTAL (2)** **(S) 138.00**

**"OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.**

\*For Reissues, see above

**SUBMITTED BY**

Name (First/Last)

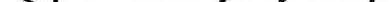
Steven A. May

**Complete (if applicable)**

• Reduced by Basic Filipp Fee paid      **SUBTOTAL (3)**      **(S) 40.00**

**SUBTOTAL (3)**

Registration No. 44-912 Telephone 847-576-3635

Name (Print/Type) Steven A. May Registration No. 44,912 Telephone 647-370-0000  
Signature  Date July 24, 2003

Date July 24, 2003

CE09386R

|  |                         |  |
|--|-------------------------|--|
| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | CE09386R   |
|  | First Inventor:         | Raval, Tushar et al.                                     |
|  | Title:                  | METHOD AND APPARATUS FOR DETECTING A CELL<br>RESELECTION |
|  | Express Mail Label No.: | EU940604485US  |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

17 10/26/03  
07/24/03

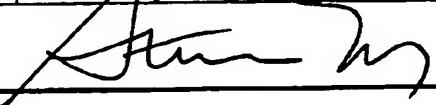
|  |  |  |   |
|--|--|--|---|
| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning utility patent application contents)  |  | ADDRESS TO:  | Mail Stop Patent Application<br>Commissioner for Patents<br>P.O.Box 1450<br>Alexandria, VA 22313-1450 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)<br><br>2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27<br><br>3. <input checked="" type="checkbox"/> Specification Total Pages 21<br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table.<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure   |  | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence<br>(if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identify of above copies |   |
| ACCOMPANYING APPLICATION PARTS   |  |  |   |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br><br>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)<br><br>11. <input type="checkbox"/> English Translation Document (if applicable)<br><br>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations<br><br>13. <input type="checkbox"/> Preliminary Amendment<br><br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><br>15. <input type="checkbox"/> Certified Copy of Priority Document<br><br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br><br>17. <input type="checkbox"/> Other: _____<br>_____<br>_____<br>_____ |  |  |   |
| 4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets 4<br><br>5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  |  |  |   |
| 6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76   |  |  |   |

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

Continuation  Divisional  Continuation-in- Part (CIP) Prior Appl. No. \_\_\_\_\_  
Prior Appl. information: Examiner: \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 19. CORRESPONDENCE ADDRESS

|   |   |   |                              |               |              |
|---|---|---|------------------------------|---------------|--------------|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |   | <br><b>22917</b> | Correspondence address below |               |              |
| Name  | Steven A. May   |   |                              |               |              |
| Address   | Motorola, Inc. - Law Department<br>1303 E. Algonquin Rd.                            |   |                              |               |              |
| City  | Schaumburg  | State   | IL                           | Zip Code      | 60196        |
| Country   | U.S.A.  | Telephone   | 847-576-3635                 | Fax           | 847-576-3750 |
| Name  | Steven A. May   |   | Registration No.             | 44,912        |              |
| SIGNATURE   |  |   | Date                         | July 24, 2003 |              |

CE09386R